**WOJTEK SUDOL** 

US03477

**COMPLETE IF KNOWN** 

PTO/SB/01 (03-01)
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**DECLARATION FOR UTILITY OR** 

**DESIGN PATENT APPLICATION** 

(37 CFR 1.63)

Attorney Docket Number

**First Named Inventor** 

**Application Number** 

☑Dectaration ☐ Submitted OR With Initial Filing	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	CONCURREN	NTLY							
		Group Art Unit									
		Examiner Name									
As a holow named inve	entor I hereby declare th	at•									
As a below named inventor, I hereby declare that:											
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
IMPLEMENTING IC MOUNTED SENSOR WITH HIGH ATTENUATION BACKING											
the specification of which (Title of the Invention)											
□ is attached hereto											
OR											
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International											
Application Number	and	was amended on (MM/DD/Y)	vvv		andinabla)						
		•	′ <u> </u>	· ·	applicable).						
specifically referred to above.	wed and understand the conte	nts of the above identified sp	ecification, including	g the claims as ame	ended						
	lose information which is mate										
applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.											
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant											
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant											
breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority	Certified Copy	Attached?						
			Not Claimed	YES	NO						

[Page 1]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Alexandria, VA 22313-1450.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Labe			24737 OR			Correspondence address below			
Name									
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor									
Given Name Wojtek (first and middle [if any])  Family Name SUDOL or Surname									
Inventor's X Date WAPH, 5, 2004						4,5,2004			
Andover /		Massachuse	etts	United	States		United States		
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City		State		Zip			Country		
NAME OF SECOND INVEN	TOR: AF	petition has be	en file	d for th	is unsig	gned i	inventor		
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature	·				Date				
		T							
Residence: City		State		Coun	try		Citizenship		
Mailing Address									
Maining Floor 633		<del>T</del>							
City		State		Zip	_		Country		
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SR/02A attached hereto									